



State of Washington
Application for a Water Right

Please follow the attached instructions to avoid unnecessary delays.



FELSDK-ES 6.6.06
For Ecology Use
Fee Paid 50.00
Date 5/24/06
CK# 1250 FM
\$450 pd 6.2.06 CHL# 1252

Section 1. APPLICANT - PERSON, ORGANIZATION, OR WATER SYSTEM

Name Peggy Hoag Home Tel: (503) 222 - 2659
Mailing Address 2934 SW Montgomery Dr Work Tel: () -
City Portland State OR Zip+4 97201 + 1677 FAX: () -

Section 2. CONTACT - PERSON TO CALL ABOUT THE APPLICATION

☒ Same as above

Name _____ Home Tel: () -
Mailing Address _____ Work Tel: () -
City _____ State _____ Zip+4 _____ + _____ FAX: () -
Relationship to applicant _____

Section 3. STATEMENT OF INTENT

The applicant requests a permit to use not more than 2250 (☒ gallons per minute or
☐ cubic feet per second) from a ☐ surface water source or ☒ ground water source (check only one) for the purpose(s)
of seasonal irrigation, stockwater, commercial/industrial and group domestic supply.

ATTACH A "LEGAL" DESCRIPTION OF THE PLACE OF USE. (See instructions.) NOTE: A tax parcel
number or a plat number is not sufficient.

Estimate a maximum annual quantity to be used in acre-feet per year: 960 acre-feet per year

☐ Check if the water use is proposed for a short-term project. Indicate the period of time that the water will be needed:

From / / to / /

Section 4. WATER SOURCE

If SURFACE WATER	If GROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for <u>four</u> well(s).
Number of diversions: _____	
Source flows into (name of body of water):	Size & depth of well(s): To be determined.

LOCATION

Enter the north-south and east-west distances in feet from the point of diversion or withdrawal to the nearest section corner: to be determined, approx: 3900 ft S & 200 ft E of NW corner Sec. 22; 900 ft S & 2650 ft W, 600 ft S & 1300 ft W, and 350 ft S & 150 ft W all from E1/4 corner Sec. 22.

¼ of	¼ of	Section	Township	Range(E/W)	County	If location of source is platted, complete below:		
						Lot	Block	Subdivision
NW	SW	22	3N	20E	Klickitat			
NESW OR	NWSE	22	3N	20E	Klickitat			
NWSE OR	NESE	22	3N	20E	Klickitat			
NE	SE	22	3N	20E	Klickitat			

For Ecology Use	Date Received: _____	Priority Date: _____
SEPA: Exempt/Not Exempt	FERC License # _____	Dept. Of Health # _____
Date Accepted As Complete _____	By _____	Date Returned _____ By _____
WRIA: <u>31 Klickitat</u>		

Section 5. GENERAL WATER SYSTEM INFORMATION

- A. Name of system, if named:
n/a
- B. Briefly describe your proposed water system. **(See instructions.)**

Pump from wells to supply pressure pipe distribution system.
- C. Do you already have any water rights or claims associated with this property or system? ☐ YES ☒ NO
PROVIDE DOCUMENTATION.

Section 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION (Completed for all domestic/public supply uses.)

- A. Number of "connections" requested: 5 Type of connection 4 homes and winery/commercial development (Homes, Apartment, Recreational, etc.)
- B. Are you within the area of an approved water system? ☐ YES ☒ NO
If yes, explain why you are unable to connect to the system. *Note: Regional water systems are identified by your County Health Department.*

Complete C. and D. only if the proposed water system will have fifteen or more connections.

- C. Do you have a current water system plan approved by the Washington State Department of Health? ☐ YES ☒ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.
- D. Do you have an approved conservation plan? ☐ YES ☒ NO
If yes, when was it approved? _____ Please attach the current approved version of your plan.

Section 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION (Complete for all irrigation and agriculture uses.)

- A. Total number of acres to be irrigated: 390
- B. List total number of acres for other specified agricultural uses:
- | | |
|-----------|-------------|
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
| Use _____ | Acres _____ |
- C. Total number of acres to be covered by this application: 390
- D. Family Farm Act (Initiative Measure Number 59, November 3, 1977, as amended by Chapter 237, Laws of 2001)
Add up the acreage in which you have a controlling interest, including only:
‡ Acreage irrigated under water rights acquired after December 8, 1977;
‡ Acreage proposed to be irrigated under this application;
‡ Acreage proposed to be irrigated under other pending application(s).
1. Is the combined acreage greater than 6000 acres? ☐ YES ☒ NO
2. Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☒ NO
If yes, enter permit no: _____
- E. Farm uses:
Stockwater - Total # of animals approx. 20 Animal type horses, cattle, etc
(If dairy cattle, see below)
Dairy - # Milking _____ # Non-milking _____

Section 8. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water?

☒ YES ☐ NO

May have storage ponds.

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point, and some portion of the storage will be above grade, you must also apply for a reservoir permit. You can get a reservoir permit application from the Department of Ecology.

Section 9. DRIVING DIRECTIONS

Provide detailed driving instructions to the project site.

Hwy 97 through Goldendale to junction with Hwy 14.
East on Hwy 14 approx. 26 miles to property.

Section 10. REQUIRED MAP

A. Attach a map of the project. (See instructions.)
Attached

Section 11. PROPERTY OWNERSHIP

A. Does the applicant own the land on which the water will be used? ☒ YES ☐ NO
If no, explain the applicant's interest in the place of use and provide the name(s) and address(es) of the owner(s):

Own all except portion of N1/2SE1/4 Sec. 22 lying N of hwy, which is in process of being
purchased.

B. Does the applicant own the land on which the water source is located? ☒ YES ☐ NO
If no, submit a copy of agreement:

I certify that the information above is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though I may have been assisted in the preparation of the above application by the employees of the Department of Ecology, all responsibility for the accuracy of the information rests with me. Access is granted to extent otherwise allowed by law. An appointment is needed for onsite access.


Applicant (or authorized representative)

5.20.06
Date

Landowner for place of use (if same as applicant, write "same")

Date

Use this page to continue your answers to any questions on the application. Please indicate section number before answer.

Section 3. (cont'd)

LEGAL DESCRIPTION OF THE PLACE OF USE

Within Section 22: N1/2 EXCEPT NW1/4NW1/4; N1/2SW1/4 EXCEPT SR 14; and that portion of the N1/2SE1/4 lying North of SR 14 right of way.

Within Section 21: E1/2SE1/4NE1/4, and approximately 0.4 acres described as follows:

Beginning a the intersection of the East line of Sec. 21 and the North right of way of SR 14; Thence northerly along the E line of Sec. 21 a distance of 125.00 feet; thence westerly and parallel to the East-West centerline of said Section 21 a distance of 125 feet; thence southerly and parallel to the East line of Sec. 21 a distance of 139.77 feet, more or less, to the intersection with the North right of way of SR 14; thence northeasterly along the North right of way a distance of 125.92 feet, more or less, to the point of beginning.

ALL within T 3 N., R. 20 E.W.M.

Klickitat County Parcel #s: 03202100000700, 03202200000100, portion of 03202200000300.

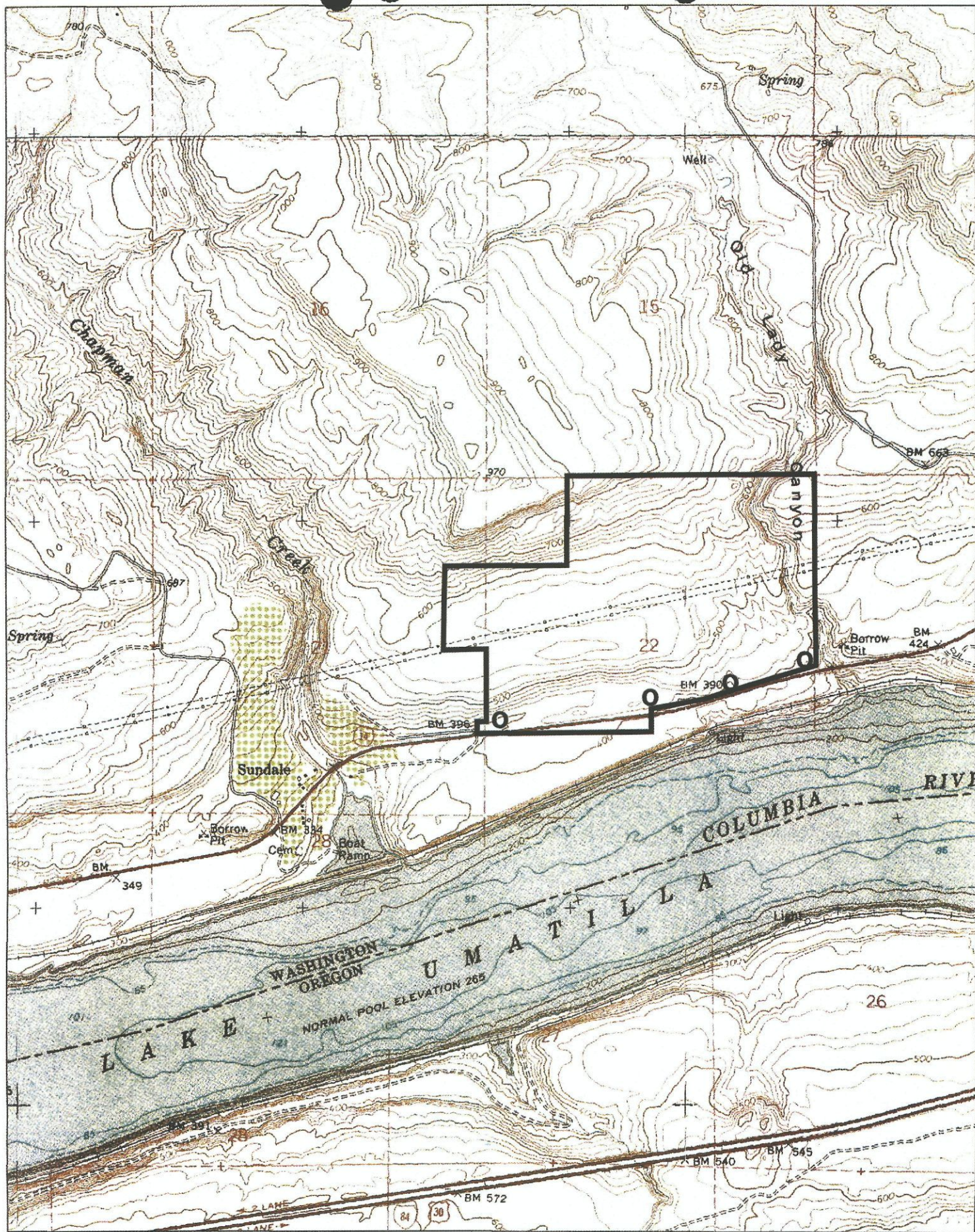
We are returning your application for the following reason(s):	
_____ Examination fee was not enclosed	APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
_____ Section number(s) _____ is/are incomplete	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:	
Please provide the additional information requested above and return your application by _____ (date).	

Ecology staff _____ Date _____

Ecology is an Equal Opportunity and Affirmative Action employer.

To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

T. 20 N., R. 20 E.W.M.



3-D TopoQuads Copyright © 1999 DeLorme Yarmouth, ME 04096 Source Data: USGS 950 ft Scale: 1 : 24,000 Detail: 13-0 Datum: WGS84

Map Attachment